## PATENT APPLICATION FEE DETERMINATION RECORD Effective COUNTY, 2003

Application or Docket Number

09/901087

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			T , , , , , , , , , ,	11. 17		11111 27		RATE	FEE	7 7	RATE	FEE	
FOR			NUMBER	NUMBER FILED 1		NUMBER EXTRA			E\$385	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS -			minus 20= *					X\$ <del>{</del> }=	1000	OR	X\$18 =		
INDEPENDENT CLAIMS			minus 3 = *					X43=	1	OR	X8b=		
М	ULTIPLE DEPE	RESENT					+145=	<del> </del>					
*1	f the differenc	e in column 1 is	less than zero, enter "0" in column 2				TOTAL	<del> </del>	OR	+290= TOTAL			
\	$C^{0}/\alpha_{c}/\alpha_{c}$		MENDED - PART II				IOIAL	<u> </u>	OR	TOTAL OTHER	THAN		
_	But the start years and	Tomographic and the graphical	(Column 2)		(Column 3)	SMALL		ENTITY	OR	SMALL			
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		BATE	ADDI- TIONAL PEE		RATE	ADDI- TIONAL FEE	
	Total	· 58	Minus	# Q	8	= .		x\$9=		OR	X\$(8=	\$18	
A	Independent	ENTATION OF MI	Minus	- *** (	0	= 		X(13=	. \	OR	126=		
	11/13/03	ENTATION OF MI	JETIFLE DE	PENDENT	CLAIIVI			+ 45 =		OR	- <del>1</del> 910=		
•	lt/t.st.			·			,	TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE		
_		(Column 1)	Part of the Control o	(Colum	nn 2)	(Column 3)	١,		· ·	. ,			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER OUSLY	PRESENT EXTRA	4	RATE	ADDI- TIONAL PEE		RATE	ADDI- TIONAL FEE	
	Total	. 98	Minus	** 9	18	=		x19=		OR	X\$/8=		
AME	Independent	* 6	Minus	***	<u> </u>	=		X43=		OR	×86=		
	FIRST PRESENTATION OF MUL		LIPLE DEF	PNDENT	CLAIM •			+145=		OR	1290=		
								TOTAL ADDIT. FEE			TOTAL ADDIT: FEE		
	(Column 1) (Column 2) (Column 3)							10011.1 22.		' '	ADDITE LL		
MENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		x\$9=	~-	OR	X\$[8=		
	Independent	<u> </u>	Minus	***		=		X13=		OR	X86		
۲	FIRST PRESE	NTATION OF MU	LTIPLE DEP	'ENDENT (	CLAIM		-			ľ		<del></del>	
* If the entry in column 1 is less than the entry in column 2 write "0" in column 3										OR L	†∂10= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													